

Syracuse University NSF REU PROGRAM for Summer 2024

A current Vehicle Registration must be shown or copy/photo enclosed at point of submitting application to our office.

Print all information clearly and include your signature. Incomplete forms will not be processed.

Applications are due by May 20th via email to parkmail@syr.edu to be ready upon arrival to campus.

1. Student Information:

Last Name: _____

First: _____ Middle: _____

Current Address: _____

Permanent Address: _____

Permanent Phone #: _____

Cell Phone #: _____

Email Address: _____

Program of Study: _____

SU Parking & Transportation Services

621 Skytop Rd, Suite 190

Syracuse, NY 13244-5300

2. Permit lot choice. Please see campus map for location.

Comstock Ave Garage cost is \$421 - Expires 8/15/24

Colvin Street Lot cost is \$86 - Expires 8/15/24

3. Vehicle information/ Please provide current vehicle information and photo of vehicle registration:

State	Plate	Make	Model	Style (i.e. 4-door, hatchback, SUV)	Color	Year

4. Payment method:

Credit/Debit Card. ***If choosing the credit card method, you must call the Parking and Transit Services office at 315.443.4652 upon submitting application. If your credit card declines, your parking request cannot be processed.**

5. Certification

I UNDERSTAND THAT PARKING IS AT MY OWN RISK AND THAT I AM RESPONSIBLE FOR ALL SYRACUSE UNIVERSITY PARKING RULES AND REGULATIONS. Signature X _____

Submit form via email to parkmail@syr.edu and payment by Monday May ??th for timely processing.

(Office Use Only)

Place permit sticker here.

LOT: _____ Fee: _____

Issue Date: _____ Payment Type: _____

End Date: _____ Issued By: _____

UID#: _____ Permit UID#: _____